

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Andy Barr for Congress, Inc.

Full Name (Last, First, Middle Initial)

**A. Amanda Milward**

Mailing Address PO Box 2059

City	State	Zip Code
Lexington	KY	40588-2059

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
06 / 03 / 2016

Amount of Each Disbursement this Period

824.12

☐ Memo Item

Transaction ID : B-E-20098

Full Name (Last, First, Middle Initial)

**B. Amanda Milward**

Mailing Address PO Box 2059

City	State	Zip Code
Lexington	KY	40588-2059

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
06 / 17 / 2016

Amount of Each Disbursement this Period

787.23

☐ Memo Item

Transaction ID : B-E-20129

Full Name (Last, First, Middle Initial)

**C. Amanda Milward**

Mailing Address PO Box 2059

City	State	Zip Code
Lexington	KY	40588-2059

Purpose of Disbursement  
Postage Reimbursement

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2016

Amount of Each Disbursement this Period

6.45

☐ Memo Item

Transaction ID : B-E-20095

Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....

1617.80

TOTAL This Period (last page this line number only).....